

RECEIVED

SEP 15 2011



**BOARD OF COUNTY COMMISSIONERS'**  
**(BOCC) CONCURRENCE FORM** County Manager's Office

This form must be completed for all staff reports being prepared for BOCC meetings/public hearings and is the cover sheet for the staff report. The original staff report, the required 10 double-sided copies, and a PDF version of the staff report need to be submitted to the County Manager's Office one (1) week in advance of the scheduled presentation date.

**To:** Office of the County Manager

**From (Name & Division):** Ann Morgan

**Date:** 09/06/11

**Phone#:** x11541 - Ann Morgan

**E-mail Address:** Amorgan@statesattorney.us

**Staff Report Topic:**

*(The text provided here will also be reflected on the meeting agenda and county's website.)*

FY 12 Child Support Cooperative Reimbursement Agreement - Susan M. Little, Chief Assistant State's Attorney

**Requested Meeting Date (mm/dd/yr):** September 22, 2011

**Est. Presentation Time:** \_\_\_\_\_

**Type of Meeting:**

*(Click to place a check mark in the following appropriate boxes.)*



Administrative Business *(The Consent Agenda Committee determines which items are eligible for the consent agenda.)*



Worksession



Closed Session



Public Hearing (a.m. ☐ or p.m. ☐ )



BOCC/BOE Mtg.



County/Municipalities Mtg.



Power Point Presentation

**Board Action Desired:**



Decision



Guidance



Information

**Staff Report Review:**

This staff report has been thoroughly reviewed first by the appropriate divisions/agencies noted on Page 2 followed by those outlined below :



Budget Officer



Finance Director



County Attorney's Office



Assistant County Manager



County Manager

Initials

[Signature]

[Signature]

MSC

[Signature]

[Signature]

Date

9.8.2011

9/12/11

9/12/11

9/13/11

9/14/11

Comments Y/N  
(Page 2)

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\_\_\_\_\_

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\_\_\_\_\_

**Other Reviewing Divisions/Agencies:**

(Click to place a check mark in the following appropriate spaces.)

	<u>Initials</u>	<u>Date</u>	<u>Comments Y/N</u> <u>(noted below)</u>
<input type="checkbox"/> Animal Control			
<input type="checkbox"/> Citizens Services			
<input type="checkbox"/> Community Development			
<input type="checkbox"/> Emergency Management			
<input type="checkbox"/> Fire & Rescue Services			
<input type="checkbox"/> Health Services			
<input type="checkbox"/> Human Resources			
<input type="checkbox"/> Interagency Information Technologies			
<input type="checkbox"/> Internal Audit			
<input type="checkbox"/> Management Services			
<input type="checkbox"/> Parks & Recreation			
<input type="checkbox"/> Public Works			
<input type="checkbox"/> Transit Services			
<input type="checkbox"/> Utilities & Solid Waste Management			
<input checked="" type="checkbox"/> Other: Accounting - Grants Div	SLH	9/8/11	
Other:			
Other:			

**Elected Officials or Independent Agencies:**

	<u>Initials</u>	<u>Date</u>	<u>Comments Y/N</u> <u>(noted below)</u>
<input type="checkbox"/> Board of Education			
<input type="checkbox"/> Board of Elections			
<input type="checkbox"/> Board of License Commissioners			
<input type="checkbox"/> Citizens Care & Rehabilitation Center			
<input type="checkbox"/> Frederick Community College			
<input type="checkbox"/> Frederick County Public Libraries			
<input type="checkbox"/> Montevue Assisted Living			
<input type="checkbox"/> Sheriff's Office			
<input type="checkbox"/> Social Services			
<input type="checkbox"/> State's Attorney's Office			

**Comments:**

- From: \_\_\_\_\_ Date: \_\_\_\_\_
- From: \_\_\_\_\_ Date: \_\_\_\_\_
- From: \_\_\_\_\_ Date: \_\_\_\_\_
- From: \_\_\_\_\_ Date: \_\_\_\_\_
- From: \_\_\_\_\_ Date: \_\_\_\_\_

## GRANT SUMMARY FORM

Complete the front and back of this form and attach to the BOCC concurrence form with grant application and route through the Accounting Office/Grants Accountant for signoff at least two weeks prior to presentation to BOCC.

**Project Title:** FY 12 Child Support Cooperative Reimbursement **Grantor:** DHR - Child Support Administration

**County Project Administrator & Dept:** SAO - Child Support Div - Susan M. Little, Chief Asst St Atty

**Project Period:** 10/1/11 - 9/30/12 **Renewable:** YES **If yes, # years** Annually

**Application Deadline:** \_\_\_\_\_

### Source of Funds

Grant Award/ Application Amount	Direct Federal	Federal Pass Thru	State	Other Funds
FY2012		888,766		

County Match	Source of County Match (if any)
FY2012	551,465 \$539,608 + Inc/Liab - 11,857 <i>(Net \$ 315,501)</i>

**Does the grant require adding a new position(s)?**

**Yes or No**

**NO**

If so, is it your desire to fund the position beyond the grant period?

**Yes or No**

If so, how do you intend to fund beyond grant period?

### Grant Purpose/Project Description:

To provide legal representation for the Department of Social Services for the establishment of paternity, support, and health insurance orders, as well, as enforce and modify child support orders for the residents of Frederick County.

Is Indirect Cost Recovery Allowed per the grant guidelines?

**Yes or No**

**YES**

If yes, what percentage or dollar amount is allowed?

Is Indirect Cost Recovery requested in grant application?

**Yes or No**

**YES**

Amount of indirect cost recovery requested in application?

\$382,375

If grant is awarded, do you plan to subaward grant funds?

**Yes or No**

**NO**

If yes, to whom?

Continue to page 2

### To be completed by Grants Office

County Match - Required \$ 551,465  
 County Match - Non Required \$ 0  
 Indirect Costs \$ 235,964 (If applicable)  
 Total County Contribution \$ 315,501

Accounting Office  
 Grants Accountant Review  
 Initials Sut 9/2/11

### Comments:

\$ 235,964 is the portion of indirect cost that will be pd by DHR (Approx)

$(382,375 \times .62) = \$ 235,964$

## GRANT SUMMARY FORM

Complete the front and back of this form and attach to the BOCC concurrence form with grant application and route through the Accounting Office/Grants Accountant for signoff at least two weeks prior to presentation to BOCC.

### Source of Funds

Grant Award/ Application Amount	Direct Federal	Federal Pass Thru	State	Other Funds
FY2012		888,766		
Prior Year (1)		880,002		
Prior Year (2)		869,428		

County Match	Required	Non Required
FY2012	551,465	
Prior Year (1)	526,378	
Prior Year (2)	509,417	

Additional information regarding prior year grant award & County match

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J. CHARLES SMITH, III  
STATE'S ATTORNEY



*Office of the State's Attorney  
for Frederick County  
P.O. Box 210  
Frederick, Maryland 21705-0210  
301-600-1523  
FAX 301-600-2195*


NANCI O. HAMM  
DEPUTY STATE'S ATTORNEY

DAVID R. CALLAHAN  
DEPUTY STATE'S ATTORNEY

*Child Support Division  
301-600-1538  
FAX 301-600-2200*

September 6, 2011

TO: Board of County Commissioners

FROM: Susan M. Little   
Chief Assistant State's Attorney, Child Support Division

**ISSUE:** Should the Board of County Commissioners approve the FY 2012 Child Support Enforcement Administration Cooperative Reimbursement Agreement (CRA) for the State's Attorney's Office?

**BACKGROUND:** The State's Attorney's Office has been receiving funding from the State of Maryland Child Support Enforcement Administration since the 1980's for the legal representation provided to the Department of Social Services. The current grant reimburses 66% of the total expenses (less the state's administrative fee) incurred by Frederick County for thirteen full time positions and one 70% position. Approved Incentive Projects are funded from incentive monies earned by the Child Support Division (per legislation) and paid annually to the County by CSEA.

This document has been reviewed and approved by the Department of Social Services, the Frederick County Grants accountant, Budget and Finance Departments, and the County Attorney. Furthermore, we have received verbal/email authorization to proceed with this CRA from Stephanie Usserey, Director, Field Services, Maryland Child Support Enforcement Administration.

**STAFF RECOMMENDATION:** Staff recommends that the Board of County Commissioners approve the FY 2012 Child Support Enforcement Administration CRA for the State's Attorney's Office as drafted and approve associated budget transfers.

Page 2  
September 6, 2011

**FUNDING INFORMATION:**

**Budget Implication:** No    YES – X (If yes, provide the necessary information as outlined below)

**Name of Account:** SAO – Child Support Division

**Account Number:** 22-1121 -G2001 2

**Amount of Funding Request:** \$551,465

**Other Information Pertinent to this Request:**

/Attachments

STATE OF MARYLAND  
DEPARTMENT OF HUMAN RESOURCES  
CHILD SUPPORT ENFORCEMENT ADMINISTRATION  
COOPERATIVE REIMBURSEMENT AGREEMENT

This Agreement is hereby made and entered into by and between the Department of Human Resources' Child Support Enforcement Administration (CSEA) of the State of Maryland, hereinafter referred to as the "Department" or "CSEA" and the Frederick County Board of County Commissioners, a body corporate and politic, acting through the State's Attorney's Office for Frederick County hereinafter collectively referred to as the "Provider." The Provider agrees to operate a program to provide legal representation for child support services in accordance with the federal Department of Health and Human Services (HHS) approved State Plan under Title IV-D of the Social Security Act and the Cooperative Reimbursement Program Application, and Terms and Conditions, which are included herein and made a part of this Agreement.

This Agreement shall be effective from October 1, 2011 through September 30, 2012.

Total Cost:	<u>\$1,440,231</u>
Less Administrative Fee Retained by the Department:	\$ <u>53,961</u>

STATE OF MARYLAND  
DEPARTMENT OF HUMAN RESOURCES  
CHILD SUPPORT ENFORCEMENT ADMINISTRATION

COOPERATIVE REIMBURSEMENT AGREEMENT  
APPLICATION

<i>Name of Provider:</i> Frederick County State's Attorney's Office		
<i>Address:</i> 100 West Patrick Street		
<i>City:</i> Frederick	<i>State:</i> Maryland	<i>Zip Code:</i> 21701
<i>Federal I.D. #:</i> 52-6000943		
<i>Program Supervisor:</i> Susan M. Little, Chief Asst. St. Atty.	<i>Phone No.:</i> (301) 600-1538	
<i>Additional Phone No.:</i> (301) 600-2212	<i>Fax No.:</i> (301) 600-2200	
<i>Email address:</i> susanmlittle@comcast.net		

**PART I - PROVIDER'S CERTIFICATION**

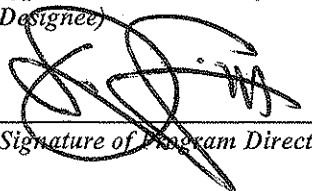
Application is hereby made to the Department for approval of a program to provide child support services in accordance with the HHS approved State plan under Title IV-D of the Social Security Act.

Blaine R. Young - President, Frederick County Board of County Commissioners  
*Typed Name and Title of Chief Executive (County Executive; Chairman, Board of County Commissioners; Mayor; or their Designee)*

\_\_\_\_\_  
*Signature of Chief Executive*

\_\_\_\_\_  
*Date*

J. Charles Smith III - State's Attorney, Frederick County  
*Typed Name and Title of Program Director (Circuit Court Administrator; Judge or Designee)*

  
\_\_\_\_\_  
*Signature of Program Director*

9/7/11  
\_\_\_\_\_  
*Date*



PART II. LOCAL DEPARTMENT OF SOCIAL SERVICES/

LOCAL CHILD SUPPORT AGENCY REVIEW

I have reviewed the contents of this Cooperative Reimbursement Agreement Application prepared by the Frederick County State's Attorney's Office and certify that it meets the child support requirements for the Department of Social Services, Local Child Support Enforcement Agency for Frederick County.

Diane Gordy, Director, Frederick County Department of Social Services

Typed Name and Title

  
\_\_\_\_\_  
Signature

9-6-11  
\_\_\_\_\_  
Date

## **PART II. PROGRAM NARRATIVE**

### **Service Requirements:**

Listed below are the categories of services and participation required for the State's Attorney's Office in providing legal representation for the local child support office. The detailed requirements are included on Pages 5 through 13.

- A. Establishment of Paternity and Obligations for Child Support and Medical Support**
- B. Enforcement of Obligations for Child Support and Medical Support/Insurance**
- C. Review and Adjustment of Child Support Orders**
- D. Participation In Local Program Initiatives**
- E. Conflict of Interest**
- F. Customer Service**
- G. Staff Development and Training**
- H. Collaboration and Coordination**

**PART II. PROGRAM NARRATIVE****Service Requirements:****A. Establishment of Paternity and Obligations for Child Support and Medical Support**

1. In-state Case Processing Requirements - The State's Attorney's Office shall:
  - (a) Initiate action to establish paternity and obligations for child support and medical support within seven (7) days of receipt of electronic referrals from the local child support office in accordance with the Code of Federal Regulations (CFR), Maryland State Annotated Code - Family Law Article and Courts and Judicial Proceedings Article, Code of Maryland Regulations (COMAR), and CSEA Program Policy.
  - (b) Within 90 days after the alleged Non-Custodial parent is located, establish paternity and/or obligation for child support and medical support or complete service of process proceedings to establish paternity and/or a support order and if necessary, document unsuccessful attempts to serve process in accordance with the State's guidelines defining diligent efforts consistent with 45 CFR 303.3.
  - (c) In accordance with federal and state law, include in the petition for child support a provision for health insurance coverage and a health insurance withholding order for all new orders, regardless of case type, ability to pay, or availability of a health insurance policy. The decision to include health insurance coverage and/or a health insurance withholding order will be left to the discretion of the court.
2. Interstate Case Processing Requirements – The State's Attorney's Office shall:
  - (a) Establish paternity and/or support (including health insurance/medical support) in accordance with the Uniform Interstate Family Support Act, Maryland State rules and regulations, CSEA Program Policy, and 45 CFR 303.7.
  - (b) Update the Establishment/Enforcement Summary screens on all inquiries sent and/or received.
  - (c) Follow-up interstate cases by using CSNET and/or document generation forms to provide and/or obtain case status information.
  - (d) Provide copies of UIFSA documents to the local child support office.
  - (e) Retain case until action requested to establish paternity and/or the support obligation is completed.
  - (f) After order establishment for an initiating case, notify the Responding State to refer all future correspondence to the Local child support office and provide to the Responding State the contact information for the Local child support office.
3. Other Responsibilities – The State's Attorney's Office shall perform those other duties as checked by the Local Child Support Office:
  - (a) TCA Non-Cooperation:

XX If the TCA customer fails to cooperate in the establishment of paternity and/or support obligation, input the non-cooperation code on the automated child support enforcement system (CSES).

**PART II. PROGRAM NARRATIVE**

**Service Requirements:**

**A. Establishment of Paternity and Obligations for Child Support and Medical Support (cont'd)**

XX In the event that the TCA customer is sanctioned, the TCA case is closed and becomes a Non-TCA case, follow CSEA Non-TCA intent to close policy and provide notification to the local child support office.

XX If good cause is determined, close the case in accordance with CSEA Policy and procedures and provide notification to the local child support office in accordance with negotiations with the local office.

**(b) Non-TCA Non-Cooperation:**

XX In the event that the Non-TCA Customer is non-cooperative, issue intent to close notice to the Non-TCA customer and document CSES in accordance with CSEA policy and procedure.

XX Notify the local child support office that the intent to close has been issued in accordance with procedures negotiated with the local child support office.

**(c) Non-Custodial Parent Relocation Required:**

XX Using CSES, assess case back to the location function. Retain all other interest in the case to include hard copy documents until such time that there is a final disposition on the case.

**(d) Disposition after Paternity and/or Support Order Establishment**

XX Enter on paternity and support order information on CSES in accordance with CSEA Policy and procedures.

☐ Establish fiscal accounts related to the support order in accordance with CSEA Policy and procedures.

XX Provide, if requested, a copy of the support order and guidelines (if applicable) to the local child support office.

XX If available, provide a copy of the health insurance card.

XX If available, update CSES with the non-custodial parent's current employment and health insurance information on the NCP's screen.

XX Update the Establishment Summary screen as needed on CSES.

☐ Using CSES, assess the case to the fiscal function.

**PART II. PROGRAM NARRATIVE (cont'd)****B. Enforcement of Obligations for Child Support and Medical Support/Insurance:**

1. The State's Attorney's Office shall enforce, (to include but not be limited to contempt, garnishments, liens, judgments, criminal non-support, etc.) *in-state and interstate* obligations for support (child support, alimony in conjunction with child support and/or medical support) referred by the local child support office in accordance with the Code of Federal Regulations (CFR), Maryland State Annotated Code - Family Law and Courts and Judicial Proceedings Articles, Code of Maryland Regulations (COMAR), and CSEA Program Policy.
  - XX The States Attorney's Office shall document in CSES all enforcement actions taken in accordance with CSEA policies and procedures
  - XX The State's Attorney's Office shall prepare all legal documents related to the enforcement function.
  - XX The State's Attorney's Office shall file all appropriate legal documents within seven (7) business days of receipt of electronic referral from the local child support agency.
2. The State's Attorney's Office shall enforce employers' earnings withholding and health insurance enrollment requirements.
  - a. If an employer willfully refuses to withhold child support payments or remit the deducted amount in accordance with §10-129 of the Family Law Article from an obligated parent's earnings without a valid reason, the State's Attorney's Office shall take an enforcement action in accordance with Maryland State Annotated Code – Family Law and Court and Judicial Proceedings Article.
  - b. If an employer willfully refuses to enroll a child, disenrolls or eliminates coverage for a child without a valid reason, the State's Attorney's Office shall take enforcement action in accordance with the Code of Federal Regulations (CFR), Maryland State Annotated Code - Family Law and Courts and Judicial Proceedings Articles, Code of Maryland Regulations (COMAR), and CSEA Program Policy, when the following conditions have been met:
    1. Such coverage is available to the obligated parent in accordance with the CFR defining reasonable cost; and
    2. Such coverage would not substantially reduce the amount of the child support obligation.

**C. Review and Adjustment of Child Support Orders:**

The State of Maryland is required by federal regulations at 45 CFR 303.8 to provide services, upon request of either party to review and adjust support orders. The review and adjustment actions shall be completed within 180 days from receipt of the request from either party for both the local child support office and the State's Attorney's Office.

The State's Attorney's Office shall, based on a referral from the local child support office provide services to review and/or adjust support orders as checked below:

**PART II. PROGRAM NARRATIVE (cont'd)****C. Review and Adjustment of Child Support Orders (cont'd):**

**XX** Review and Adjustment of Support Orders in accordance with Maryland Child Support Guidelines.

(a) Within five (5) days of receipt of a referral from the local child support office, the State's Attorney's Office shall evaluate the documentation of the review conducted by the local office and make a determination to either seek an adjustment or refer the case back to the local office for additional information. Under no circumstance should a case be referred back to the local office if the sole reason for rejection is the review resulted in a downward modification. The petition should not be based on the request of either party. The petition should be for modification.

(b) After receipt of the financial and other pertinent information, the State's Attorney's Office shall conduct a review and apply the child support guidelines. In cases where there is a 25% change in the amount of the support obligation, the State's Attorney's Office shall seek an adjustment in the order. If the 25% threshold is not met, the State's Attorney's Office, at their discretion, may seek an adjustment in the order.

(c) If a review of a case determines that the order does not contain a provision for health insurance, the State's Attorney's Office shall seek a modification of the order to add a provision for health insurance, whether or not an adjustment to the amount of the child support obligation is required.

After the order is adjusted, the State's Attorney's Office shall provide notification to the local child support agency by:

☐ Updating CSES accounts in accordance with CSEA policy and procedures.

**XX** Provide, if requested, a copy of the modified order and guidelines.

**D. Participation in Departmental Initiatives:**

The State's Attorney's Office shall participate in the Department initiatives described in Addendum A (attached) that are geared toward establishment and enforcement of support as negotiated between the Local Child Support Office and the State's Attorney's Office. Describe each initiative and include in the description the process that will be used for documenting and tracking activities):

**E. Conflict of Interest:**

In accordance with Ethics Docket 2007-02 ~ State's Attorneys under Title 10 of the Family Law Article do in fact represent the CSEA in child support proceedings in an attorney-client relationship and do not represent the same to any other person.

In the event of a conflict of interest, the State's Attorney's Office may address the issue by (Check all boxes that apply):

☐ Entering into agreements with neighboring jurisdictions to handle conflict cases;

☐ Providing for a conflict attorney by either designating a specific attorney in the State's Attorney's Office to handle such cases or contracting with a private attorney to provide legal services. The cost of the attorney's services may be incorporated into the Cooperative Reimbursement Agreement contract budget, or

Service Requirements:E. Conflict of Interest (cont.):PART II. PROGRAM NARRATIVE (cont'd)

- ☐ Requiring the obligee to sign a Notice of Legal Representation and an acknowledgement and waiver of possible conflict of interest which allows the child support attorney to appear at any subsequent proceeding and represent the CSEA.

The State's Attorney's Office shall maintain a log of cases in which a determination that a conflict exists. For each such case, the State's Attorney's Office shall document the case file and CSES by specifying that a conflict exists, the condition(s) causing the conflict and the method used to process the case.

F. Customer Service

1. Describe in Addendum B (attached), in detail, your customer service procedures for handling customer inquiries to include procedures for providing liaison with the CSEA Customer Service Unit and procedures for processing work orders received from the CSEA Call Center (Customer Care Center) contractor through the Local Child Support Agency. In processing work orders, the State's Attorney's Office shall maintain a log of all work orders received, respond to customers within 10 working days of receipt of the work order and document in CSES information about the issue(s) raised and how the issue(s) was (were) addressed.
2. Provide the name(s) and direct access telephone number(s) and e-mail address(es) for the following employees:
  - a. Employee(s) responsible for serving as liaison with the CSEA Customer Service Unit.
  - b. Employee(s) and back up for responding to Call Center work orders.

G. Staff Development and Training

1. Child Support Program Policy – The State's Attorney's Office shall require employees providing services under this contract to attend Child Support Training provided by CSEA to include but not be limited to "Introduction to Child Support" and any training on new policy(ies). In addition, the State's Attorney's Office shall maintain documentation of employees' satisfactory completion of the training. For more information see the following website; <http://www.dhrnet.dhr/hrdt/training/training.htm>
2. Automated Child Support System (CSES) – The State's Attorney's Office shall require employees (who have not been previously trained) whose function includes updating information in the automated child support enforcement system to enroll in CSES training during the first six months of the contract. In addition, employees are to enroll and participate in any training that is provided by CSEA related to CSES enhancements.
3. Child Support Program Policy and CSES System Releases: The State's Attorney's Office shall require employees who provide services under this contract to review all Circular letters, memoranda and other information released by the Child Support Enforcement Administration related to child support program policy and automated system enhancements and changes. These documents are available on the DHR Net at [www.dhrnet.dhr](http://www.dhrnet.dhr) (DHR Intranet). Offices that do not have access to this website must maintain a hard copy or electronic file that contains the documents.

**PART II. PROGRAM NARRATIVE; (cont'd)**  
**Service Requirements**

4. The provider shall forward documentation of completion of all required training to the CSEA Contract Manager for this contract (i.e. certificate of completion or sign-in sheets, etc.).

**H. Collaboration and Coordination Meetings**

The State's Attorney's Office shall negotiate to establish and participate in periodic meetings with the Frederick County Department of Social Services and/or other partners as delineated below for the purpose of collaboration and coordination. The State's Attorney's Office shall maintain copies of meeting agendas and minutes.

**PART III. PROGRAM PERSONNEL**

**A. Position List**

In Addendum C (attached), provide for each title or classification the number of positions, position identification number(s) and job description that details duties and responsibilities. This is mandatory for all full and part-time positions funded under this contract. Justification for new positions must be included in this section.

**B. Table of Organization**

In Addendum C (attached), Submit a table of organization depicting each personnel position included in this contract. The table of organization must show the lines of authority, functional units, position titles or classifications, and position identification numbers.

**C. Documentation of Salary Costs**

The Provider must show the basis to determine the budgeted salary costs (i.e., payroll records, pay scale or system generated reports) and attach the documentation to Part V, Program Budget Summary page. (See Employee Certification A/B of the Terms and Conditions)

Such documentation support is required when employees work on:

- (a) A Federal award.
- (b) A Federal award and a non-Federal award.
- (c) An indirect cost activity and a direct cost activity.
- (d) Two or more indirect activities which are allocated using different allocation bases, or
- (e) An unallowable activity and a direct or indirect cost activity.

**Documentation of Personnel Cost Must:**

- (a) Reflect an after the fact distribution of the actual activity of each employee.
- (b) Account for the total activity for which each employee is compensated.



- (c) Be prepared at least monthly and must coincide with one or more pay periods, and;
- (d) Be signed by the employee.
- (e) Be signed by the employee's supervisor.

Budget estimates or other distribution percentages determined before the services are performed do not qualify as support for charges to this agreement.

#### **Part IV. ANNUAL PERFORMANCE GOALS:**

##### **A. Annual Performance Goals**

In Addendum D (attached), Goals are to be established in collaboration with the local child support office and should be based on the needs of the local child support office in meeting the performance measure goals for the jurisdiction. The method used to arrive at the goals must be described. This should include statistical data documented in the CSES, Court Calendar/Disposition Reports, as well as other factors impacting the needs of the local child support office.

#### **Part V. LOCAL INCENTIVES**

##### **Program Explanation and Use of Incentive Funds**

Incentive money received from the Federal Government in accordance with 42 U.S.C. §658a will be distributed by the DEPARTMENT in accordance with the Md. Code Ann., Fam. Law §10-106.1, "COMAR 07.07.11.01 - .05, Child Support Enforcement Incentives" and 45 CFR 303.52. State law allows incentive funds to be used for IV-D and Non-IV-D activities. Add additional pages if necessary and begin numbering at page 14b.

1. Privatizing and outsourcing of child support enforcement services
2. Improving automation capabilities
3. Creating public awareness projects
4. Developing program and special projects
5. Establishing a performance incentive program to provide incentives for employees
6. Assisting in staff development
7. Establishing community outreach programs and activities

Document your incentive plan in Addendum E (attached). Describe each project.

#### **SAMPLE PLAN**

##### **(6) ASSISTING IN STAFF DEVELOPMENT AND TRAINING**

**Project Title:** TRAINING WORKSHOPS

**Type of Project:** IV – D

**Project Description:** Develop specialized training workshops and/or developmental meetings for IV-D employees on a monthly basis.

**Estimated Cost of the Project:** \$2,100

**How the project improves the effectiveness or efficiency of the Child Support Program:**

Workshops and/or developmental meetings for IV-D employees are designed to provide education and instruction on new legal updates and better develop the practical skills of the Legal Assistant. These meetings allow workers to discuss problems, issues, and strategies they have encountered and used to better serve our IV-D clients. It is also an opportunity to provide current office information with regards to statistics, goals, improvements and/or changes, and discuss procedures used and or needed. This forum also allows for scheduling qualified speakers who are able to discuss and present various issues that pertain to the daily challenges of the IV-D child support worker.

**Time period for this project:** One year

**Evaluation of Project:** This project has been very beneficial for the office as it provides a regularly scheduled forum for reviewing day-to-day procedures. Everyone is given the same information at the same time and provides for a positive work atmosphere.


**THE REMAINDER OF THIS PAGE IS LEFT INTENTIONALLY BLANK.**

*In witness whereof, the Parties have executed this Agreement on or before the date first set herein.*

ATTEST:

  
\_\_\_\_\_  
Witness Signature

FOR THE PROVIDER:

  
\_\_\_\_\_  
Signature - Program Director  
J. Charles Smith III, State's Attorney, Frederick  
County  
Name and Title of Program Director

9/7/11 (Date Signed)

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Signature - Chief Executive  
Blaine R. Young, President, Frederick Co BOCC  
Name and Title of Chief Executive

\_\_\_\_\_  
(Date Signed)

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Signature  
Gina Higginbotham  
Interim Executive Director  
Child Support Enforcement Administration


\_\_\_\_\_  
(Date Signed)

This Agreement Approved as to Form and Legal Sufficiency by the Office of the Attorney General:

\_\_\_\_\_  
Assistant Attorney General

\_\_\_\_\_  
(Date Signed)

**PART V- PROGRAM BUDGET EXPLANATION**

 <b>1. Personnel</b> (List Title and Position I.D.#)	Grade	Step	Annual Salary	Total Hours Worked Per Week	Total Hours Worked on Program Per Week	Percent of Time on Child Support Program	Cost To Program
				35			
Chief Asst State's Attorney - #01	62		\$97,567	35	35	100%	\$97,567
Assistant State's Attorney - #02	59		\$66,081	35	24.5	70%	\$46,257
Assistant State's Attorney - #03	59		\$67,663	35	35	100%	\$67,663
Assistant State's Attorney - #04	59		\$69,307	35	35	100%	\$69,307
Child Support Supervisor - #05	54		\$60,155	35	35	100%	\$60,155
Legal Office Associate III - #06	11		\$36,391	35	35	100%	\$36,391
Legal Office Associate III - #07	11		\$44,433	35	35	100%	\$44,433
Legal Office Associate III - #08	11		\$46,155	35	35	100%	\$46,155
Legal Office Associate III - #09	11		\$47,452	35	35	100%	\$47,452
Legal Office Associate III - #10	11		\$47,588	35	35	100%	\$47,588
Legal Office Associate III - #11	11		\$41,562	35	35	100%	\$41,562
Legal Office Associate III - #12	11		\$46,239	35	35	100%	\$46,239
Legal Office Associate II - #13	10		\$30,560	35	35	100%	\$30,560
Legal Office Associate I - #14	8A		\$26,119	35	35	100%	\$26,119
Insert title and position I.D.				0.001		0%	\$0
Insert title and position I.D.				0.001		0%	\$0
Insert title and position I.D.				0.001		0%	\$0
Insert title and position I.D.				0.001		0%	\$0
Overtime	Insert explanation for overtime						\$0
Other (explain)	Insert explanation of other salary related cost						\$0
				<b>FTE:</b>	<b>13.7</b>	<b>Total:</b>	<b>\$707,448</b>

**Fringe Benefits: Enter the Percentage for Each Fringe Benefit**

Benefits List	Cost of Benefits
FICA 7.65% of Salaries	\$54,120
Workman's Compensation	\$449
Health Insurance	\$126,057
Retirement	\$107,970
Life Insurance	\$1,631
Unemployment Insurance	\$1,452
Dental Insurance	\$582
<b>Total :</b>	<b>\$292,261</b>

**PART V- PROGRAM BUDGET EXPLANATION**

2. Travel	Explanation	Cost to Program																																																						
<b>A. Mileage</b> (Privately Owned Vehicle) Using the county's mileage rate.	<table border="1"> <thead> <tr> <th>Miles</th> <th>County Mile Rate</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>___ miles x \$___ per mile (enter city/county government mileage allowance)</td> <td></td> <td>\$0.00</td> </tr> <tr> <td colspan="3">Insert justification for mileage</td> </tr> </tbody> </table>	Miles	County Mile Rate	Total	___ miles x \$___ per mile (enter city/county government mileage allowance)		\$0.00	Insert justification for mileage			<b>A.</b>  \$0																																													
Miles	County Mile Rate	Total																																																						
___ miles x \$___ per mile (enter city/county government mileage allowance)		\$0.00																																																						
Insert justification for mileage																																																								
<b>B. IV-D Conferences Only</b> (No Exceptions, <u>Must</u> list each conference, number of attendees and cost.)  Attach official conference information, for example, brochure, flyer, etc.	<p>List Conferences Separately, Number of Attendee's and Cost</p> <p>Insert Conference name here</p> <table border="1"> <thead> <tr> <th># To Attend</th> <th>Nights</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>Accommodations (per night): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Registration Fee (per attendee): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Tolls (per vehicle): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Meals: \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Airfare: \$0.00</td> </tr> </tbody> </table> <p>Insert Conference name here</p> <table border="1"> <thead> <tr> <th># To Attend</th> <th>Nights</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>0</td> <td></td> <td>Accommodations (per night): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Registration Fee (per attendee): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Tolls (per vehicle): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Meals: \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Airfare: \$0.00</td> </tr> </tbody> </table> <p>Insert Conference name here</p> <table border="1"> <thead> <tr> <th># To Attend</th> <th>Nights</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>0</td> <td></td> <td>Accommodations (per night): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Registration Fee (per attendee): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Tolls (per vehicle): \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Meals: \$0.00</td> </tr> <tr> <td></td> <td></td> <td>Airfare: \$0.00</td> </tr> </tbody> </table> <p><u>Document County's Per Diem Rate:</u></p> <p>Breakfast: Insert county breakfast rate here Lunch: Insert county lunch rate here Dinner: Insert county dinner rate here</p>	# To Attend	Nights	Total			Accommodations (per night): \$0.00			Registration Fee (per attendee): \$0.00			Tolls (per vehicle): \$0.00			Meals: \$0.00			Airfare: \$0.00	# To Attend	Nights	Total	0		Accommodations (per night): \$0.00			Registration Fee (per attendee): \$0.00			Tolls (per vehicle): \$0.00			Meals: \$0.00			Airfare: \$0.00	# To Attend	Nights	Total	0		Accommodations (per night): \$0.00			Registration Fee (per attendee): \$0.00			Tolls (per vehicle): \$0.00			Meals: \$0.00			Airfare: \$0.00	<b>B.</b>  \$0
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		Airfare: \$0.00																																																						
<b>Total:</b>		<b>\$0</b>																																																						

3. Supplies (List Each Item)	Method of Allocation (Explain how cost is determined)	Cost	Cost to Program
Pens, Pencils, Markers, Paper, Clips, Labels, Tape, Envelopes, Folders, Stationary, Printer Cartridges, Staples, Staplers	Purchased through the County contract	\$3,350.00	\$3,350
Insert supply items here	Insert cost determination here	\$0.00	
Insert supply items here	Insert cost determination here	\$0.00	
Insert supply items here	Insert cost determination here	\$0.00	
<b>Total:</b>			<b>\$3,350</b>

**PART V- PROGRAM BUDGET EXPLANATION**

4. Equipment	Explanation	Cost to Program
<b>A. Purchases</b> Itemized specific cost	<b>Items Purchasing</b> <div>Quantity      Cost      Total</div>	<b>A.</b>  \$0
	Insert item purchasing <div>\$0.00      \$0.00</div>	
	Insert item purchasing <div>\$0.00      \$0.00</div>	
	Insert item purchasing <div>\$0.00      \$0.00</div>	
	Insert item purchasing <div>\$0.00      \$0.00</div>	
	Insert item purchasing <div>\$0.00      \$0.00</div>	
	Insert item purchasing <div>\$0.00      \$0.00</div>	
	Insert item purchasing <div>\$0.00      \$0.00</div>	
	Insert item purchasing <div>\$0.00      \$0.00</div>	
<b>B. Rented</b> Indicate monthly rate for each item. Include rental agreement or justification for anticipated cost.	<b>Item Renting</b> <div>Quantity      Cost      Total</div>	<b>B.</b>  \$0
	Insert items renting <div>\$0.00      \$0.00</div>	
	Insert items renting <div>\$0.00      \$0.00</div>	
	Insert items renting <div>\$0.00      \$0.00</div>	
<b>C. Depreciated</b> Include the method used for determining the amount of depreciation as an attachment. Note: You cannot depreciate an item that was previously expensed.	<b>Item Depreciated</b> <div>Quantity      Cost      Total</div>	<b>C.</b>  \$0
	Insert depreciated items <div>\$0.00      \$0.00</div>	
	Insert depreciated items <div>\$0.00      \$0.00</div>	
	Insert depreciated items <div>\$0.00      \$0.00</div>	
<b>Total:</b>		<b>\$0</b>

**PART V- PROGRAM BUDGET EXPLANATION**

5. Occupancy (Rent)	Cost Program									
	Total Square Footage/ Total Number of Employees	Square Footage Occupied By CSEA/ Number of CSEA Employees	Occupancy Percentage For CSEA	Monthly Cost of Total Space Rental	Monthly Cost of Total Utilities	Monthly Cost of Total Other	Monthly Cost of Space Rental CSEA	Monthly Cost of Utilities CSEA	Monthly Cost of Other CSEA	
<p>Prior approval must be received from the Child Support Administration for all occupancy cost to be paid via a space allocation plan. Use allowance for space, utilities and equipment included as allocated cost must be specifically for child support staff. In this regard:</p> <p>a reasonable method of allocation with supporting documentation must be submitted with the CRA application. Column B contains three (3) methods of allocation for cost related to occupancy.</p>	<b>Methodology</b>									
	Square Footage Occupied By CSEA Divided by Total Square Footage Occupied.									
	(State Owned Buildings) Determine The Average Commercial Rental Rate Per Square Foot Within the Jurisdiction									
	Total Number of CSEA Employees Occupying The Rental Space Divided By Total Number of Employees Occupying The Rental Space									
<b>Total:</b>										<b>\$0</b>

**PART V- PROGRAM BUDGET EXPLANATION**

8. Miscellaneous	Explanation				Cost to Program
<b>a. Telephone</b>		Installation Cost	Operation/ Monthly Cost	# of Lines	
(1) Land Lines	1) Installation cost plus (monthly) operation cost x 12 months		\$36.00	14	a. 1) \$6,048
(2) Wireless	2) Monthly rate and charges (Air Time) x (12 months)				2) \$0
(3) Pagers	3) Monthly rate and charges (Air Time) x (12 months)				3) \$0
<b>b. Printing</b>	b. List Items			Item Cost	
	Motion for Contempt/Motion to Reissue			\$600.00	b.
	Letterhead/Envelopes			\$600.00	\$1,500
	Business Cards			\$300.00	
<b>c. Photocopies</b>	c. Number copies x cost per copy	# of Copies	Cost Per Copy		c.
			\$0.00		\$0
<b>d. Postage</b>	d.	# of Stamps	Cost	Total	d.
(1) Class	(1) Number of stamps x postal rate per stamp OR amount determined in approved cost allocation plan	6,339	0.44	\$2,789	1) \$2,789
(2) Registered	(2) Number of # items x postal rate	90	\$15.24	\$1,372	2) \$1,372
<b>e. Indirect Cost</b> A current (within 3 years) cost allocation plan must be on file at CSEA or submitted with the CRA proposal. Approval of indirect costs will be made consistent with Office of Management and Budget Circular A-87; Cost Principles for State and Local Government.	e. Provide documentation on how indirect cost was determined. FY 10 Federal OMB A-87 Cost Allocation Plan - \$354,051 plus 8% average increase to obtain FY 12 Indirect Cost  Date of current Cost Allocation Plan: _____ Date current Cost Allocation Plan Submitted to CSEA: _____		Indirect Cost \$382,375.00		e. \$382,375
<b>f. Private Attorney</b> (Conflict of Interest Cases)	f. \$ _____ per hour for hours or \$ _____ per case for _____ cases.	Cost Per Hr.	# of Cases		f. \$0
<b>g. Genetic Testing</b>	g. # of Test ____ x Cost Per Test ____	# of Test 396	Cost Per Test \$38.00		g. \$15,048
<b>h. Other</b>	Liability Insurance Equipment Maintenance Contract Private Investigation/Process Service Transcripts/Interpreters Dues/Subscriptions Insert other maintenance items Insert other maintenance items		\$10,440.00 \$2,438.00 \$275.00 \$330.00 \$2,700.00 \$0.00 \$0.00		h. 16,183
<b>Total:</b>					<b>\$425,315</b>



**PART V - PROGRAM BUDGET SUMMARY**

<b>7. Incentive Project</b>	<b>Explanation</b>	<b>Cost to Program</b>
(1) Privatizing and outsourcing of child support enforcement services.	Insert incentive explanation	\$0
(2) Improving automation capabilities.	Electronic Filing	\$10,857
(3) Creating public awareness projects.	Insert incentive explanation	\$0
(4) Developing programs and special Projects.	Insert incentive explanation	\$0
(5) Establishing a performance incentive program to provide incentives for employees	Performance Incentive	\$1,000
(6) Assisting in staff development and training.	Insert incentive explanation	\$0
(7) Establishing community outreach programs and activities.	Insert incentive explanation	\$0
<b>Total</b>	<b>Title IVD Projects:</b>	<b>\$11,857</b>

**INSERT INCENTIVE AMOUNT****DISTRIBUTED BY CSEA IN FY 11:****\$11,857.00**

(Total incentive cost is not to exceed the fiscal year distributed by CSEA).

**PART V - PROGRAM BUDGET SUMMARY**

		Total Estimated Cost
1. Personnel	A. Salary	\$707,448
	B. Fringe Benefits	\$292,261
2. Travel		\$0
3. Supplies		\$3,350
4. Equipment		\$0
5. Rent		\$0
6. Miscellaneous		\$425,315
7. Total Operating Costs (Sum of Lines 1-6)		\$1,428,374
8. Local Share Operating Costs (34% of Line 7)		\$485,647
9. DHR Administratrution Fee (Insert on Page One) (1/9 th of the amount on Line 8)		\$53,961
10. Federal Share Operating Costs (Line 7 Minus Line 8)		\$942,727
11. Total Incentive Project Cost		\$11,857
12. Total Local Program Costs (Line 8 Plus Line 9)		\$551,465
13. Federal Financial Participation (Line 10)		\$942,727
14. Maximum Amount to be Paid By DHR (Line 13 Minus Line 9)		\$888,766
15. Total Program Costs: (Insert On Page One) (Line 7 Plus Line 11)		\$1,440,231

**STATE OF MARYLAND  
DEPARTMENT OF HUMAN RESOURCES  
CHILD SUPPORT ENFORCEMENT ADMINISTRATION  
SAO COOPERATIVE REIMBURSEMENT AGREEMENT APPLICATION**

**ADDENDUM A**

**Subject: Part II.D Participation in Departmental Initiatives:**

**This addendum is to provide the above referenced information or procedure.**

**The State's Attorney's Office shall participate in the Department initiatives described in this Addendum. These addenda are geared toward establishment and enforcement of support, as negotiated between the Local Child Support Office and the State's Attorney's Office. Describe each initiative in the space below. Include in the description the process that will be used for documenting and tracking activities:**

**STATE OF MARYLAND  
DEPARTMENT OF HUMAN RESOURCES  
CHILD SUPPORT ENFORCEMENT ADMINISTRATION  
SAO COOPERATIVE REIMBURSEMENT AGREEMENT APPLICATION**

**ADDENDUM B**

**Subject: Part II F. Customer Service:**

This addendum is to provide the above referenced information or procedure.

1. Describe in detail, your customer service procedures for handling customer inquiries, including procedures for providing liaison with the CSEA Customer Service Unit, and procedures for processing work orders received from the CSEA Call Center (Customer Care Center) contractor through the Local Child Support Agency. In processing work orders, the State's Attorney's Office shall maintain a log of all work orders received, respond to customers within 10 working days of receipt of the work order and document in CSES information about the issue(s) raised and how the issue(s) was (were) addressed or resolved.

The Legal Office Associate assigned to the receptionist duties in the State's Attorney's Office answers all complaint calls. Depending upon the nature of the complaint, the call is referred to the Legal Office Associate assigned to the case. The Legal Office Associate retrieves the paper file and all current information on the CSES system and resolves all questions that they are capable of answering. Any unresolved issues are referred to the attorney for the appropriate team (i.e. establishment, modification, contempt). If the client still has questions or concerns, the case is forwarded for review and action to the Child Support Chief Assistant State's Attorney. The client is offered a telephone or office conference with the Child Support Chief Assistant State's Attorney.

2. Provide the name(s) and direct access telephone number(s) and e-mail address(es) for the following employees:
  - a. Employee(s) responsible for serving as liaison with the CSEA Customer Service Unit;
    - 2a. Susan M. Little, Chief Assistant State's Attorney, 301-600-2212, is the liaison with the CSEA Customer Service Unit. [susanmlittle@comcast.net]
  - b. Employee(s) and back up for responding to Call Center work orders;
    - 2b. Work orders are to be directed to Ann Morgan, Child Support Supervisor, who will log them in and forward them to the Legal Office Associate responsible for the case response.

**STATE OF MARYLAND  
DEPARTMENT OF HUMAN RESOURCES  
CHILD SUPPORT ENFORCEMENT ADMINISTRATION  
SAO COOPERATIVE REIMBURSEMENT AGREEMENT APPLICATION**

**ADDENDUM C**

**Subject: Part III PART III. PROGRAM PERSONNEL:**

This addendum is to provide the above referenced information or procedure.

**A. Position List**

Provide for each title or classification the number of positions, position identification number(s) and job description that details duties and responsibilities. This is mandatory for all full and part-time positions funded under this contract. Justification for new positions must be included in this section.

**CHIEF ASSISTANT STATE'S ATTORNEY**

**Position No. 1**

This position supervises the Child Support Division of the State's Attorney's Office, serves as liaison between the Child Support Division and other agencies, and establishes the Division's legal, administrative and procedural policies. In addition to administrative functions, this individual supervises the workings of the office and most specifically supervises the modification team. This includes the receipt, review, and approval of modification requests. Approved requests are forwarded for processing to the Legal Office Associates assigned to the modification team. Duties include, but are not limited to, case analysis and assessment, legal research, pleading preparation, witness interviews, trial preparation, as well as settlement and litigation of cases. Additional tasks include providing legal advice and guidance to FCDSS, advising staff and FCDSS of statutory changes and significant case law decisions, attending meetings, seminars and conferences, securing and enforcing judgments, and attaching assets. This position is 100% IV-D funded.

**ASSISTANT STATE'S ATTORNEY**

**Position No. 2**

This position is responsible for the criminal and civil contempt processes. Duties include coordinating the investigation of resources and the ability to pay, preparation and filing of criminal information, civil motions for contempt, service of warrants by Sheriff's Office, including extradition from other states, if necessary, determination of witnesses, preparation of subpoenas, interviewing witnesses, conducting plea negotiations, litigating the case before a jury, monitoring payments post-trial, and taking the necessary action should payments become delinquent, including the filing and prosecution of violations of probation. Additional duties of this position include case analysis and assessment, legal research, pleading preparation, witness interview, trial preparations, as well as, settlement and litigation of cases. Provides legal advice and guidance to FCDSS, advises staff and FCDSS of statutory changes and significant case law decisions, attends meetings, seminars and conferences, secures and enforces judgments, and attaches assets. This position is 70% IV-D funded.

**ASSISTANT STATE'S ATTORNEY**

**Position No. 3**

This position is responsible for the prosecution and settlement of child support cases. Duties include the review of individual cases, case analysis and assessment, legal research, pleading preparation, witness interviews, trial preparation, as well as, settlement and litigation of cases. Also, provides legal advice and guidance to FCDSS, advises staff and FCDSS of statutory changes and significant case law decisions, attends meetings, seminars and conferences, secures and enforces judgments, and attaches assets. This position is 100% IV-D funded and is responsible for providing backup coverage, as needed, for the Assistant State's Attorney's position #4 located in the child support section at the Department of Social Services.

**ASSISTANT STATE'S ATTORNEY**

**Position No. 4**

This position is housed at the Frederick County Department of Social Services (FCDSS) and provides legal services for the establishment of paternity and the establishment and enforcement of child and medical support orders for the clients of the FCDSS. This position is accessible to clients on the days and hours the FCDSS is open to the public. Duties include, but are not limited to the processing of applications in order to establish paternity, and/or establish, modify, and/or enforce child support and health insurance orders; document actions taken via the Child Support Enforcement System (CSES); and interview customers to obtain information required to process/pursue paternity, as well as, child and medical support. This position provides supervision, instruction, and assistance to FCDSS staff, as well as, develops and conducts training sessions, as needed; and communicates with other FCDSS departments to obtain information needed to establish child support orders. Additional responsibilities include scheduling appointments to meet with clients in order to settle the issues of paternity, establishment, modification, and/or the enforcement of child support/health insurance orders, and provide assistance in settling cases that are scheduled for court on Tuesdays and Fridays. Also, provides legal advice and guidance to FCDSS, advises staff and FCDSS of statutory changes and significant case law decisions, attends meetings, seminars and conferences, secures and enforces judgments, and attaches assets. This position is 100% IV-D funded.

**CHILD SUPPORT SUPERVISOR**

**Position No. 5**

This position is responsible for supervising the establishment team. This includes the receipt, review and assigning of all electronic prompts including establishment requests. Approved requests are forwarded for processing to the Legal Assistants assigned to the teams. Duties include case analysis and assessment, legal research, pleading preparation, witness interview, trial preparation, and settlement of cases. This position is responsible for reviewing the initial setup and update of court order and court dispositions screens on CSES, is the liaison with the Sheriff's Office's for CSES security monitor issues, and is certified as a DNA specimen collector for the performing of genetic testing and will collect DNA samples as needed during the court process for forwarding to the lab for analysis. Additional duties include the preparation of the county budget and Cooperative Reimbursement Agreement, coordinate the signature process, as well as, monitor expenditures and budget balances, and prepare necessary budget transfers, etc, as needed. This position is 100% IV-D funded and is responsible for providing backup coverage, as needed, for the Assistant State's Attorney's position #4 located in the child support section at the Department of Social Services.

**LEGAL OFFICE ASSOCIATE III**

Position Nos. 6,7

These positions are responsible for the processing of establishment requests. This includes the establishment of paternity, support, and/or health insurance orders. Daily tasks include client interviews, prepare and file pleadings, negotiate settlements, draft consent orders, and respond to work orders. All work tasks include maintaining and updating CSES. The individuals in these positions are certified as a DNA specimen collector for the performing of genetic testing and collects DNA samples as needed during the court process for forwarding to the lab for analysis. These positions are 100% IV-D funded and are also responsible for providing backup coverage, as needed, for the Assistant State's Attorney's position #4 located in the child support section at the Department of Social Services.

**LEGAL OFFICE ASSOCIATE III**

Position Nos. 8,9

These positions are responsible for the processing of incoming and outgoing interstate establishment requests. This includes the establishment of paternity, support, and/or health insurance orders. Daily tasks include client interviews, the preparation and filing of UIFSA petitions, negotiate settlements, and draft consent orders. Interstate case responsibilities include preparing petitions and transmittals, communicating with responding agencies, gathering information needed, and respond to work orders. All work tasks include maintaining and updating CSES. The individuals in these positions are certified as a DNA specimen collector for the performing of genetic testing and collects DNA samples as needed during the court process for forwarding to the lab for analysis. These positions are 100% IV-D funded and are also responsible for providing backup coverage, as needed, for the Assistant State's Attorney's position #4 in the child support section located at the Department of Social Services and for the Legal Office Associate II in position 13.

**LEGAL OFFICE ASSOCIATE III**

Position Nos. 10,11,12

These positions are responsible for the processing of modification and enforcement requests. Daily tasks include client interviews, prepare and file pleadings, process civil and criminal contempt referrals, negotiate settlements, and draft consent orders. Interstate case responsibilities include preparing petitions and transmittals, communicating with responding agencies, gathering information needed, and respond to work orders. All work tasks include maintaining and updating CSES. These positions are 100% IV-D funded and are responsible for providing backup coverage, as needed, for the Assistant State's Attorney's position #4 in the child support section located at the Department of Social Services.

**LEGAL OFFICE ASSOCIATE II**

Position No. 13

This position is responsible for all initial contacts with this office. Duties include receiving and screening all incoming telephone calls, taking messages, and rerouting all calls to appropriate individuals. Receiving all office visitors and providing assistance to them, the collection and distribution of all incoming mail, updating and maintaining CSES with information provided by clients through telephone calls or office visits, maintain office supply inventory, process all of the Division purchases and requisitions through People Soft software accounting program, assisting the Chief Assistant State's Attorney position 1 on the modification and enforcement team, and taking notes during child support hearings. This position is 100% IV-D funded.

**LEGAL OFFICE ASSOCIATE I**

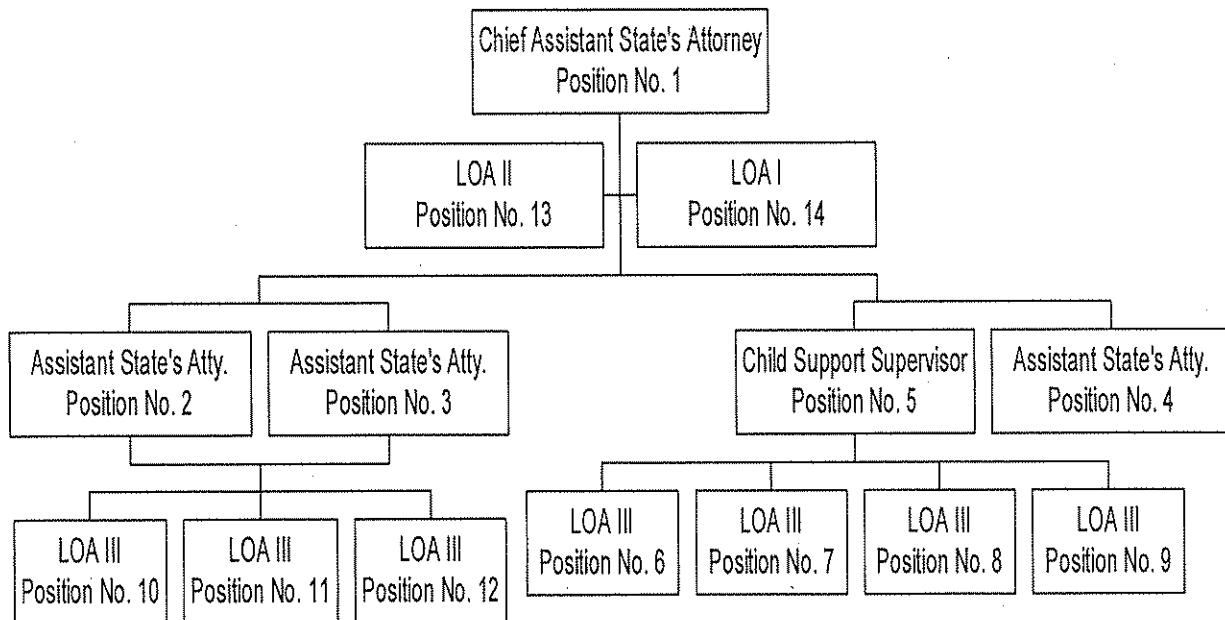
Position No. 14

This position is responsible for the entering and updating of court docketing information on CSES. Additional duties include preparing letters and subpoenas for clients to appear for court, prepare motions for contempt and reissue, coordinate docket information with the Assignment and Clerk's offices, take court notes during child support hearings, and assist with interstate correspondence and backup coverage, as needed, and the scanning of child support files to establish and maintain an electronic office filing system. This position is 100% IV-D funded.

**B. TABLE OF ORGANIZATION**

Submit a table of organization depicting each personnel position included in this contract. The table of organization must show the lines of authority, functional units, position titles or classifications, and position identification numbers.

Frederick County State's Attorney's Office  
Child Support Unit





ADDENDUM C

Contract No. CSEA/CRA-12-014

Page C-5 of 5

**C. DOCUMENTATION OF SALARY COSTS**

The Provider must show the basis used to determine the budgeted salary costs (i.e., payroll records, pay scale or system generated reports) and attach the documentation to Part V, Program Budget Summary page. (See Employee Certification A/B of the Terms and Conditions).

All salaries are determined by the rules and regulations of the Frederick County Board of Commissioners and vary according to the grade and type of position. Each employee completes an electronic bi-weekly time sheet, which indicates hours worked and leave claimed/accumulated. This data is used to prepare payroll and is maintained by the Payroll Accounting Office, Frederick County Government. Position Number 3 is designated as a 70% IV-D funded employee with all remaining positions being 100% IV-D funded employees.

**STATE OF MARYLAND  
DEPARTMENT OF HUMAN RESOURCES  
CHILD SUPPORT ENFORCEMENT ADMINISTRATION  
SAO COOPERATIVE REIMBURSEMENT AGREEMENT APPLICATION**

**ADDENDUM D**

**Subject: Part Part IV. ANNUAL PERFORMANCE GOALS:**

**This addendum is to provide the above referenced information or procedure.**

**A. Describe the Method and Statistics Used to Establish Performance Goals:**

**Goals are to be established in collaboration with the local child support office and should be based on the needs of the local child support office in meeting the performance measure goals for the jurisdiction. The method used to arrive at the goals must be described. This should include statistical data documented in the CSES, Court Calendar/Disposition Reports, as well as other factors impacting the needs of the local child support office.**

**Goals were calculated by adding 2% to the actual estimated goal to the previous year's goal.**

**YEARLY PERFORMANCE GOALS**

**ESTABLISHMENT OF PATERNITY AND SUPPORT ORDERS**

<b>PATERNITY ESTABLISHMENT</b>	<b><i>CRA ESTABLISHED GOAL</i></b>
<b>NUMBER OF CASES FOR WHOM PATERNITY WILL BE ESTABLISHED</b>	<b>448</b>
<b>NUMBER OF CASES IN WHICH SUPPORT OBLIGATIONS WILL BE ESTABLISHED</b>	<b>1356</b>
<b><i>CRA ESTABLISHED GOAL</i></b>	
<b><i>ENFORCEMENT OF SUPPORT</i></b>	
<b>NUMBER OF CASES IN WHICH CHILD SUPPORT OBLIGATIONS WILL BE ENFORCED</b>	<b>2434</b>
<b><i>CRA ESTABLISHED GOAL</i></b>	
<b><i>MODIFICATION OF SUPPORT</i></b>	
<b>NUMBER OF CASES IN WHICH CHILD SUPPORT OBLIGATIONS WILL BE MODIFIED</b>	<b>975</b>
<b>TOTAL OF ALL GOALS</b>	<b>5213</b>

This form should reflect your agency's projected number of paternitys and support obligations to be established.

*Statistical data used to measure performance is based on data obtained from the Court Calendar and Disposition Screen produced by the CSES.*

Performance will be evaluated in accordance with the SAO Terms and conditions as set in Section III.E.3."

**STATE OF MARYLAND  
DEPARTMENT OF HUMAN RESOURCES  
CHILD SUPPORT ENFORCEMENT ADMINISTRATION  
SAO COOPERATIVE REIMBURSEMENT AGREEMENT APPLICATION**

**ADDENDUM E**

**Subject: Part      Part V. LOCAL INCENTIVES:**

**This addendum is to provide the above referenced project(s), if any:**

**IMPROVING AUTOMATION CAPABILITIES**

**Project Title:** ELECTRONIC OFFICE FILING SYSTEM-COPIER

**Type of Project:** IV-D

**Project Description:** The purchase and installation of a copier that will scan, copy, print, and/or fax from the employee's desk.

**Estimated Cost of the Project:** \$10,857 - #

**How the project improves the effectiveness or efficiency of the Child Support Program:**  
With the implementation of our electronic filing system, each worker will have the option of scanning, copying, printing, and/or faxing from their desk. Our current copier is over eight years old and handles in excess of 30,000 copies per year. We are experiencing excessive downtime and increased maintenance costs due to the extreme use and age of the machine. A new copier will provide additional services to the office and assist in the transfer to and use of an office-wide electronic filing system.

**Time period for this project:** FFY 2012

**Evaluation of Project:** This project will assist in reducing equipment maintenance costs and office supply costs. In addition, it will assist in increasing the effectiveness, quantity, and quality of work processed. With the transfer of office files to electronic form proceeding, this copier will allow us to complete the project earlier and complement the use of electronic files by being able to perform more functions.

**STATE OF MARYLAND  
DEPARTMENT OF HUMAN RESOURCES  
CHILD SUPPORT ENFORCEMENT ADMINISTRATION  
SAO COOPERATIVE REIMBURSEMENT AGREEMENT APPLICATION**

**ADDENDUM E**

**Subject: Part      Part V. LOCAL INCENTIVES:**

This addendum is to provide the above referenced project(s), if any:

**ESTABLISHING A PERFORMANCE INCENTIVE PROGRAM TO PROVIDE EMPLOYEES INCENTIVES**

**Project Title:** EMPLOYEE PERFORMANCE INCENTIVE

**Type of Project:** IV-D

**Project Description:** This incentive program is designed to further enhance the positive workplace ethic of the IV-D employee. Employees must continually achieve and increase their performance levels in order to receive the distribution of water/supply benefits. Eligible employees will be able to use the water and supplies that are provided through this project.

**Estimated Cost of the Project:** \$1,000 - #54201

**How the project improves the effectiveness or efficiency of the Child Support Program:** Performance and compliance levels are tracked by reviewing monthly reports received from CSEA that show cases being received, worked, and resolved according to the established timeframes. Adherence to the timeframes that have been developed for the office will provide a framework for meeting and exceeding goals established in our Cooperative Reimbursement Agreement. This project further allows the employee the independence to establish a work routine that meets their needs and abilities in order to achieve the goals and objective that follow their caseload.

**Time period for this project:** FFY 2012

**Evaluation of Project:** As a result of this project, employees have had a better attitude which makes for a more positive atmosphere and have broaden their views to working outside of the box in order to be more efficient and effective with their caseload. This positive atmosphere is also projected to public and co-workers that use the services of this office.

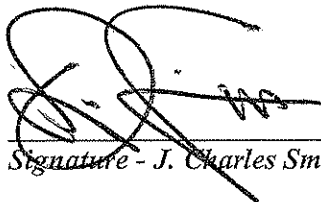
## PART VI. CERTIFICATION REGARDING LOBBYING

### Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an officer or employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award document for sub awards at all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.



Signature - J. Charles Smith III

Frederick County State's Attorney's Office  
Agency/Organization

State's Attorney  
Title

9/7/11  
Date